FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typyi is changed) over the lines	ng, type 12FE4M5
Manfactured H	ousing Institute PAC	
ADDRESS (number and s	Manfactured Housing Institute PAC	
(Check if addre	2101 Wilson Blvd	
is changed)	Arlington	VA22201
COMMITTEE'S E-MAI	CITY ▲	STATE▲ ZIP CODE ▲
Ilewis@mfgho		
1		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	
		1
		
COMMITTEE'S FAX N	UMBER	
سا لسا		
2. DATE M M M 1 1	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA	TION NUMBER C C00043463	
4. IS THIS STATEM	ENT NEW (N) OR X AMEN	DED (A)
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is t	rue, correct and complete
Type or Print Name of	TreasurerLauren Lewis	
Signature of Treasurer	Electronically Filed by Lauren Lewis	Date 12 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signals and CHANGE IN INFORMATION SHOULD BE F	
Office Use Only		information contact: stion Commission 0-424-9530 (Revised 02/2003)

This committee is a principal campaign committee. (Complete the candidate information below.) Candidate	Page 2	FEOForm 1 (Revised 02/2003)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Candidate Candidate Party Affiliation Office Sought: House Senate President District (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate (d) This committee is a (National, State (or subordinate) committee of the Republican,etc.) Part (e) X This committee is a separate segregated fund (f) This committee is a separate segregated fund This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. Mailing Address CITY STATE X ZIP CODE A		. TYPE OF COMMITTEE (Check One)
information below.) Name of Candidate Party Affiliation Candidate Party Affiliation Candidate Party Affiliation Candidate President Candidate President Candidate (National, State (or subordinate) committee of the Candidate Candidate	plete the candidate information below.)	(a) This committee is a principal campai
Candidate Candidate Party Affiliation City	principal campaign committee. (Complete the candidate	(-)
Party Affiliation Sought: House Senate President District (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate (d) This committee is a (National, State) (Openocratic, Republican, etc.) Part (e) This committee is a separate segregated fund (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. 3. Name of Any Connected Organization or Affiliated Committee Mailing Address CITY STATE ZIP CODE		
Name of Candidate (d) This committee is a (National, State (or subordinate) committee of the Republican,etc.) Part (e) X This committee is a separate segregated fund (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. 3. Name of Any Connected Organization or Affiliated Committee Mailing Address CITY STATE ZIP CODE	Senate President	
Candidate (d) This committee is a (or subordinate) committee of the Republican,etc.) Part (e) X This committee is a separate segregated fund (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. 3. Name of Any Connected Organization or Affiliated Committee Mailing Address CITY STATE ZIP CODE	is NOT an authorized committee.	(c) This committee supports/opposes onl
(d) This committee is a		
Mailing Address CITY STATE A ZIP CODE A	te) committee of the Republican,etc.) Party.	(e) X This committee is a separate segrega (f) This committee supports/opposes mo
CITY STATE A ZIP CODE A		. Name of Any Connected Organization or Affiliate
CITY STATE A ZIP CODE A		
CITY STATE A ZIP CODE A		
CITY STATE ZIP CODE A		Mailing Address
Relationship	STATE ▲ ZIP CODE ▲	
		Relationship
Type of Connected Organization:		Type of Connected Organization:
Corporation Corporation w/o Capital Stock Labor Organization	apital Stock Labor Organization	Corporation
Membership Organization Trade Association Cooperative	Cooperative	Membership Organization

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Write or Type Committee N	ame						
Manfactured Hous	ing Institute PAC						
	n of Records: Identify by name, address, (phone number optional), and position of the person in ion of Committee books and records.						
Full Name							
Mailing Address							
Title or Position ♥	CITY A	STATE▲	ZIP CODE A				
		Telephone number					
3. Treasurer: List the r name and address o	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
Full Name of Treasurer La	uren Lewis						
Mailing Address	Mailing Address Manfactured Housing Institute PAC						
	2101 Wilson Blvd	2101 Wilson Blvd					
	Arlington		22201				
Title or Position ♥	CITY A	STATE ▲	ZIP CODE A				
Treas	surer	Telephone number					
Full Name of Designated Agent							
Mailing Address							
			=				
Title or Position ♥	CITY A	STATE A	ZIP CODE A				
		Telephone number					

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9.	Banks or Other De safety deposit boxes Name of Bank, Dep	s or maintains funds.	s, rents
	Mailing Address	Federal PAC Manfactured Housing Institute PAC	
		2101 Wilson Blvd Arlington VA 2220	<u> </u>
		CITY A STATE A ZIP (CODE A